PART B - FEE(S) TRANSMITTAL

Complete and send t	(NOV	ور 2 2 2005	or]	P.O. Box 1450 Alexandria, Virg	or Patents ginia 22313-1450	4
maintenance ree nourication	13.		E FEE and ders and noting specifying	PUBLICATION FEE (if requification of maintenance fees values a new correspondence address	nired). Blocks 1 through 5 s will be mailed to the current ; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)				
WELLS ST. JOH			I hereby certify that the Issue Fee is being hand-delivered to the Issue Fee Branch, Commissioner for Patents, Alexandria, VA 22313, on the date indicated below:			
601 W. FIRST AVENUE, SUITE 1300 SPOKANE, WA 99201			Depositor's Name Survy Jours			
/25/2005 MBEYENE2 00000029 10759976			Signature C L MA M.			
1 FC:1501 2 FC:1504 3 FC:8001	1400.00 DP 300.00 DP 15.00 DP			Date 11/22	2/05	
APPLICATION NO.	FILING DATE	1- 4	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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APPLN. TYPÉ	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO)	\$300	\$1700	12/06/2005
EXAMINER		- ART UNIT C		CLASS-SUBCLASS		
ZIMMERMA	ZIMMERMAN, BRIAN A		1635 340-010100			·
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON T	HE PATEN	[(print or type)		
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(A) NAME OF ASSIGN	EE	ß) RESIDENC	CE: (CITY and STATE OR CO	UNTRY)	
, ,	NOLOGY, INC.	,-	•	OISE, IDAHO	,	
Please check the appropriate					Corporation or other private gr	oup entity Government
4a. The following fee(s) are	enclosed:	4b	. Payinerit of			
Issue Fee	19 11		A check	in the amount of the fec(s) is en	nclosed.	
Advance Order - # of	mall entity discount permitt Copies5	ed) 	Payment The Dire	by credit card. Form PTO-203 ector is hereby authorized by count Number 23-0925	8 is attached. DEFICIEN charge when executives for (3), or	ICIES credit any overpayment, to
5 Change in Entity C4-4	(from status indicated state		Deposit Acc	Juni Mullipel 23-0323	(enclose an extra (copy of uns form).
	MALL ENTITY status. See	37 CFR 1.27.		cant is no longer claiming SMA		
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco						

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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